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| PATENT APPLICATION FEE DETERMINATION RECORD                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                               |                                           |                                             | Application or Docket Number<br>10/656,272 | Filing Date<br>09/08/2003 | <input type="checkbox"/> To be Mailed |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|--------------------------------------------|---------------------------|---------------------------------------|
| Substitute for Form PTO-875                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
| APPLICATION AS FILED – PART I                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
| (Column 1)                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                               | (Column 2)                                |                                             | SMALL ENTITY <input type="checkbox"/>      |                           | OTHER THAN<br>SMALL ENTITY            |
| FOR                                                                                                                                                                                                                                                                                                                                                                                                               | NUMBER FILED                                                                                                                                                                                                                  | NUMBER EXTRA                              |                                             | RATE (\$)                                  | FEES (\$)                 |                                       |
| <input type="checkbox"/> BASIC FEE<br>(37 CFR 1.16(a), (b), or (c))                                                                                                                                                                                                                                                                                                                                               | N/A                                                                                                                                                                                                                           | N/A                                       |                                             | N/A                                        |                           | N/A                                   |
| <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(b), (f), or (m))                                                                                                                                                                                                                                                                                                                                              | N/A                                                                                                                                                                                                                           | N/A                                       |                                             | N/A                                        |                           | N/A                                   |
| <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(c), (g), or (j))                                                                                                                                                                                                                                                                                                                                         | N/A                                                                                                                                                                                                                           | N/A                                       |                                             | N/A                                        |                           | N/A                                   |
| TOTAL CLAIMS<br>(37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                                                                                  | minus 20 =                                                                                                                                                                                                                    | *                                         |                                             | X \$ =                                     |                           | OR X \$ =                             |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                            | minus 3 =                                                                                                                                                                                                                     | *                                         |                                             | X \$ =                                     |                           |                                       |
| <input type="checkbox"/> APPLICATION SIZE FEE<br>(37 CFR 1.16(s))                                                                                                                                                                                                                                                                                                                                                 | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                                           |                                             |                                            |                           |                                       |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                               |                                           |                                             | TOTAL                                      |                           | TOTAL                                 |
| * If the difference in column 1 is less than zero, enter "0" in column 2.                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
| APPLICATION AS AMENDED – PART II                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
| (Column 1)                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                               | (Column 2)                                |                                             | (Column 3)                                 |                           | OTHER THAN<br>SMALL ENTITY            |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                         | 02/27/2009                                                                                                                                                                                                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                           | SMALL ENTITY              | OR                                    |
| Total<br>(37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                                         | * 36                                                                                                                                                                                                                          | Minus                                     | ** 36                                       | = 0                                        | RATE (\$)                 | ADDITIONAL<br>FEE (\$)                |
| Independent<br>(37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                                   | - 8                                                                                                                                                                                                                           | Minus                                     | *** 8                                       | = 0                                        | X \$ =                    | OR X \$52=                            |
| <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                               |                                           |                                             | X \$ =                                     | OR X \$220=               | 0                                     |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                               |                                           |                                             | TOTAL ADD'L<br>FEE                         | OR                        | TOTAL ADD'L<br>FEE                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                               |                                           |                                             |                                            | OR                        | 0                                     |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
| (Column 1)                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                               | (Column 2)                                |                                             | (Column 3)                                 |                           |                                       |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                               | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                           | RATE (\$)                 | ADDITIONAL<br>FEE (\$)                |
| Total<br>(37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                                         | -                                                                                                                                                                                                                             | Minus                                     | **                                          | =                                          | X \$ =                    | OR X \$ =                             |
| Independent<br>(37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                                   | -                                                                                                                                                                                                                             | Minus                                     | ***                                         | =                                          | X \$ =                    | OR X \$ =                             |
| <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                               |                                           |                                             | TOTAL ADD'L<br>FEE                         | OR                        | TOTAL ADD'L<br>FEE                    |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.<br>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".<br>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".<br>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |
| Legal Instrument Examiner:<br>/RENEE HAWKINS/                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                               |                                           |                                             |                                            |                           |                                       |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.